	Best Available Copy													
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997														
CLAIMS AS FILED - PART ((Cotumn 1) (Cotumn 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE	
BASIC FEE										395.00	OR		790.00	
TOTAL CLAIMS			minus 20 =		•			x\$11=		OR	x\$22=			
INDEPENDENT CLAIMS			minus 3 =			•			x41=		OR	x82=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=						
* If the difference in column 1 is less than zero, enter "0" in column 2							L			OR	+270=			
•								TOTAL		OR	TOTAL			
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						(Column 3)	SMALL ENTITY			OR	OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	••		=		x\$11=		OR	x\$22=		
	Independent	n •		Minus	***		=		x41=		OR	x82=		
⋖	FIRST PRESENTATION OF MULTIPLE DI				DEPE	DEPENDENT CLAIM			+135=		OR	+270=		
	(Column 1) (Column 2) (Column					(Column 3)	AD	TOTAL DIT. FEE		OR ,	TOTAL VODIT, FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT			NI PRE	GHEST JMBER VIOUSLY JD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	64		=		x\$11=		OR	x\$22=		
	Independent	* Min		Minus	***		=		x41=		OR	x82=		
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=			
•	(Column 1) (Column 2) (Column 3)							AC	TOTAL OUT. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT			HI NI PRE	GHEST UMBER VIOUSLY UD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE,	
	Total	· Mir		Minus	••		=		x\$11=		OR	x\$22=		
	Independent	ent *		Minus ***			****		x41=		OR	x82=		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	·	OR	+270=			

"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

TOTAL ADDIT. FEE OR AD The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

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OR ADDIT. FEE

	PATENT	APPLICATIO Effec	ON FEE D tive Octob			ON RECOF	RD	9/	81	172	87
CLAIMS AS ED - PART I (Column 1) (Column 2)							SMALL E	OTHER THAN OR SMALL ENTITY			
T	OTAL CLAIMS			- ;			RATE	FEE	1	RATE	FEE
F	OR		NUMBER	FILED	NUMBER EXTRA		BASIC FEE		OR	BASIC FEE	860
TO	OTAL CHARGE	ABLE CLAIMS	8 mir	nus 20=			X\$ 9=		OR	X\$18=	000
INI	DEPENDENT C	LAIMS	3 mi	nus 3 =	* .		X40=		1	X80=	
M	JLTIPLE DEPEN	NDENT CLAIM P		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		OR	. XOU=				
<u>ا</u>	* If the difference in column 1 is less than zero, enter "0" in column 2								OR	+270=	
"		TOTAL		OR	TOTAL	860					
_	C	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL I					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	<u> </u>	Independent • Minus •••			=	X40=		OR	X80=		
	FIRST PRESE	+135=		OR	+270=						
									OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	ADDIT. FEE				
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F		PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent • Minus		*** =		=	X40=			X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=								OR		
									OR	+270= TOTAL	
			TOTAL ADDIT. FEE		OR	ADDIT: FEE					
		(Column 1) CLAIMS		(Colun		(Column 3)			1 1		
AMENDMENT C		REMAINING AFTER AMENDMENT	, j	NUME PREVIC PAID I	DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Q	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	:
AME	Independent		Minus	***		=	X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		.405				
• 1	f the entry in colur	+135= TOTAL		OR	+270=						
•••	lf the "Highest Nur If the "Highest Nu	mber Previously Pa mber Previously Pa	aid For" IN THIS aid For." IN THIS	ADDIT. FEE			TOTAL ADDIT. FEE				
	ine "Highest Num	ber Previously Pai	d For" (Total or	Independe	ent) is the	highest number f	ound in the app	propriate box	in col	umn 1.	

FORM PTO-875 (Rev. 8/00)